### UNITED STATES PATENT APPLICATION

9.3

Express Mailing Label No. EV443087504US	Attorney Docket No. 16039			
COMBINED DECLARATION and POWER OF ATTORNEY (Utility, Design, National Stage of PCT)				
As a below named inventor, I hereby declare that:				
TYPE OF DECLAR	ATION			
This declaration is of the following type:				
(Check one applicable	item below)			
<ul><li>[X]utility patent application</li><li>[ ] design patent application</li><li>[ ] national stage of PCT patent application</li></ul>				
INVENTORSHIP IDENT	IFICATION			
My residence, post office address and citizenshi believe that I am the original, first and sole inventor (original, first and joint inventor (if plural names are li claimed, and for which a patent is sought on the invent	(if only one name is listed below) or an isted below) of the subject matter that is			
TITLE OF INVENT	TION			
BIOCOMPATIBLE BONE IMPLAN AND METHODS FOR REPAIRING				
SPECIFICATION IDENT	IFICATION			
the specification of which:  (complete (a), (b),	or (c))			
(a) [V] is attached hereto				

(a) [X] is attached hereto. (b) [ ] was previously filed \_\_\_\_\_, as United States Patent Application Serial (c) [ ] was described and claimed in PCT International Application No. \_\_ filed on \_\_\_\_\_\_, and as amended under PCT Article 19 on and/or under PCT Article 34 on \_\_\_\_\_ (if any).

#### ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s), as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information that is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

### FOREIGN PRIORITY CLAIM

(35 USC § 119(a)-(d))

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) [x] no such applications have been filed.
- (e) [ ] such applications have been filed as follows.

Note: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below, and make the priority claim.

# PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	FILING DATE (month, day, year)	PRIORITY CLAIMED UNDER § 119 or § 365
			[]YES NO[]

### U.S. PRIORITY CLAIM (35 USC § 120)

I hereby claim the benefit under 35 USC § 120 of any United States application(s) or § 365(c) of any PCT international application designating the United States of America listed below, if any, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information that is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international application filing date of this application.

U.S. or PCT PATENT APPLICATION NO.	FILING DATE (month, day, year)	PATENT NO. (if applicable)
	(,)	

## PROVISIONAL APPLICATION CLAIM (35 USC § 119(e))

I hereby claim the benefit under 35 USC § 119(e) of any United States Provisional application listed below, if any.

U.S. PROVISIONAL	FILING DATE
APPLICATION NO.	(month, day, year)

#### **POWER OF ATTORNEY**

I hereby appoint as my attorneys and/or patent agents all attorneys and/or patent agents listed under the following Customer Number, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. All correspondence and telephonic communications should be directed to:

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### **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Date: <u>6.4.2004</u>

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